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32425 7590 12/08/2010

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 David D. Bahler

(Depositor's name)

February 15, 2011

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/576,636	03/12/2007	Christor Sindtaby	BRKP:021US	5708

TITLE OF INVENTION: COMBINED POSITIVE AND NEGATIVE PRESSURE ASSIST VENTILATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/08/2011
EXAMINER	ART UNIT	CLASS-SUBCLASS				

OSTRUP, CLINTON T 3771

128-202130

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
 Change of correspondence address (or Change of Correspondence Address Form PTO/SB/122 attached).
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2. For printing on the patent front page, list:
 (1) the name of up to 3 registered patent attorneys or agents OR, alternatively,
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 Fulbright & Jaworski LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Maquet Critical Care AB

Solna, Sweden

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

Issue Fee
 Publication Fee (No small entity discount permitted)
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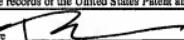
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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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Authorized Signature 

Date February 15, 2011

Typed or printed name David D. Bahler

Registration No. 30,932

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